RESIDENTIAL PLAN CHECK APPLICATION

DATE: _____ PROJECT NO.: _____
(Plan check applications expire 6 months from the above date) **(City Use Only)**

PROJECT ADDRESS:_____
Property Connected To Sewer?: □ Yes □ No

APPLICANT: _____ PHONE NO.:_____
(Required)

APPLICANT'S ADDRESS: _____

EMAIL ADDRESS: _____

PROPERTY OWNER: _____ PHONE NO.:_____
(Required)

OWNER'S ADDRESS: _____

OWNER'S EMAIL ADDRESS **(Required)**_____

CONTRACTOR:_____PHONE NO.:_____
(Required)

CONTRACTOR'S ADDRESS: _____

LICENSE NO. _____ CONTRACTOR'S EMAIL ADDRESS: _____

DESCRIPTION OF WORK:_____

_____

_____

_____

Fire Sprinklers: Existing? Yes □ No □ Required by this project? Yes □ No □
Underground Utilities: Existing? Yes □ No □ Required by this project? Yes □ No □

New Living S.F. : _____ New Basement S.F. _____
New Non-Living S.F.: _____ New Covered Porch S.F. _____
New Detached Structure S.F. _____

TOTAL ADDED SQUARE FOOTAGE: _____*

I understand the City of Los Altos does not allow phased work and/or partial inspections _____

VALUATION OF CONSTRUCTION

BUILDING $_____
ELECTRICAL $ _____
FIRE $_____
MECHANICAL $_____
PLUMBING $_____

TOTAL **$**_____

I have read this application and state that the information is true and correct. Submittal of plans for plan check shall not be construed as approval to begin construction.

APPLICANT'S SIGNATURE:

_____

Plan Check Fee $_____ Permit Fee $_____

*Note: If constructing a new residence, building or structure **all** square footage is considered new.